### Fiscal Year 2009 Appropriations Request Web Form

Welcome to Congressman Robert Aderholt's 2009 Appropriations Request form.

It is vital that you provide answers to all of these questions to give your request the strongest opportunity to receive funding. All fields in this form are required; if a question does not apply to you, please enter N/A. If you hadn't received funding in previous years please enter \$0 for the dollar amount. Please be sure to enter numbers for dollar amount questions and text for questions that ask for information other than dollar amounts. Doing so will help you avoid error messages when you attempt to submit your form. Once you've answered all the questions, please click the "Validate" button on the bottom of the form. Another window will appear showing all the responses entered. Here you will be given a chance to review your answers and make any changes. This is your only opportunity to change any of the information you entered. Print a copy for your records and save the text of the descriptions in a Word document on your computer in case you need to reuse it later. After you verify all the information you entered is correct, click the "Submit" button to have the request entered into the system.

Appropriation requests are due by **FEBRUARY 4, 2008**. If you have any questions or problems filling in this form, please call Congressman's Aderholt's office. In Cullman (Jennifer Butler-Taylor) 256-734-6043 and Mark Dawson in Washington, D.C. 202-225-4876.

House of Representatives security regulations regarding Congressional computer servers do *NOT* allow us to set up a way for the form to be partially saved. In order to familiarize yourself with the necessary information, I suggest you visit my website at <a href="http://aderholt.house.gov">http://aderholt.house.gov</a> to view and print out a \*pdf version of the form. The link is located at the very bottom of my home page. This form is *NOT* a substitute for the online process.

Note: there is sometimes a little overlap between general questions, and specific sets of questions so you may want to type your answers in a word document form which you keep for your own use, and from which you can cut and paste from in order to drop information into the online form.

| Part I: Contact Information               |            |
|---|------------|
| Requestor (Please include all contact int | formation) |
| Name of the organization making the       |            |
| request                                   |            |
| (City of; or, Organization to Help the    |            |

| Homelesss)   |      |
|--|------|
| Address  |      |
| Decision Maker   |      |
| Name of the decision maker at the organization (for example, President; Executive Director; Chairman of the County Commission)   |      |
| Contact information for the decision ma  | ker: |
| Day time phone   |      |
| Evening phone  |      |
| Cell phone   |      |
| E-mail   |      |
| Fax  |      |
| Tech Person  |      |
| Name of person who can provide<br>answers to technical questions<br>(Assistant to the Mayor; County engineer;<br>defense project manager at a particular<br>company, etc.) |      |
| Day time phone   |      |
| Evening phone  |      |
| Cell phone   |      |
| E-mail   |      |
| Fax  |      |
| If someone from the media calls our office about the project, to whom should we refer them? If not one of the above, please provide a name and cell phone number           |      |

### Complete this section only for Earmark requests:

| Part II: Funding Request Details   |   |
|--|---|
| Are you requesting an earmark for a project, or directive language to be included in the Committee Report, or a certain level of funding for a national program?  Directive Language  Earmark for a Project  Program Funding   |   |
| Name the Towns and Counties, in order from greatest to least, that will benefit from this request:   | ] |
| Have you met with Congressman Aderholt regarding this request, project, OR ANY PHASE of this project?  |   |
| If yes, Date: (MM/DD/YYYY)   |   |
| Have you met with the Congressman's staff regarding this request?  Yes No  |   |
| If yes, Name: NA   |   |
| If yes, Date: (MM/DD/YYYY)   |   |
| Project Name:  |   |
| What Local Government official or organization will have the responsibility of managing these funds if appropriated?   |   |
| FY2009 Federal Funds you are requesting? You <b>must</b> enter only numbers, not words   |   |
| What percentage of the funding will be matched locally?  |   |
| What federal agency or department do you believe to be the most likely source for the funding you are requesting? *If my staff determines that your project has a better chance in another bill, you will be contacted and asked to resubmit your entire form.  Resubmitting your form will ensure that your form receives proper consideration. |   |

| If you know, or want to suggest, which budget <b>account</b> within the agency is best, please enter that here:   |   |  |  |
|---|---|--|--|
| What is the total project cost for all phases of this project?  You <b>must</b> enter only numbers, not words   | \$  |  |  |
| Is this year's request a self-contained project within a larger series of projects?   | □ Yes □ No  |  |  |
| Has this project been included in the President's Budget Request? If so, type the project name exactly as it appears in the President's Budget request. |   |  |  |
| (End section)   |   |  |  |
| The Committee requires some additional que - EPA - HUD - USDA   | stions for projects under the following agencies: |  |  |
| Complete this section only for EPA earmark requests:  |   |  |  |
| Please specify the agency for the funding request   | E EPA  L HUD  USDA  None of the above             |  |  |
| This project is largely for economic development:   | C Yes C No  |  |  |
| This project is largely for projected growth:   | C Yes C No  |  |  |
| This project is largely for EPA compliance requirement:   | Yes No  |  |  |
| This project is largely for public health benefits:   | C Yes C No  |  |  |

| This project is largely for water quality improvements:   |     | Yes |   | No |
|---|-----|-----|---|----|
| This project is largely for EPA consent decree:   |     | Yes |   | No |
| Preliminary planning and engineering design is completed:   |     | Yes |   | No |
| The community has a financing plan certified by an authorized local official demonstrating how it will cover the 45% matching funds:  | II. | Yes |   | No |
| Assuming you do not receive full Federal funding for 55% of the project, is there a financing plan, certified by an authorized local official, demonstrating how the remaining cost of the project will be covered? |     | Yes | 0 | No |
| There is a completed facility plan, an approved capital improvement plan, or preliminary engineering report for the project that demonstrates it is cost-effective and that it will conform with NEPA requirements: |     | Yes | 0 | No |
| The community has applied for project loan funding from the appropriate State Revolving Fund; i.e. Drinking Water SRF or Clean Water SRF:   |     | Yes |   | No |
| If the answer to the previous question is yes, was the project denied funding or did it fail to make a priority list for future funding under that program:   |     | Yes |   | No |
| The community has applied for funding from the Department of Agriculture, Rural Development program:  |     | Yes |   | No |
| If the answer to the previous question is yes, was the project denied funding or did it fail to make a priority list for future funding under that program:   |     | Yes |   | No |
| Previous Funding Info:  |     |     |   |    |
| Has this project, or any phase it, received a federal EARMARK?  |     | Yes |   | No |
| Has this project, or any phase it, received   |     | Yes |   | No |

| federal funds that were a grant, as opposed to an earmark?  |            |
|---|------------|
| Have you received federal funds on a similar project in the last five fiscal years?   | C Yes C No |
| If yes, what is the exact project name as it appeared in a previous bill?   | N/A        |
| If yes, what was the amount? You <b>must</b> enter only numbers, not words  | \$ 0       |
| If yes, what was the Agency and Account?  | NA         |
| Matching Funds Info:  |            |
| Some grants require matching funds. Please indicate how much non-Federal funding you are confident of raising and the source. This is important because if a recipient is not able to complete the project, the Federal funds earmarked also cannot be used by other communities which are ready to complete a project: |            |

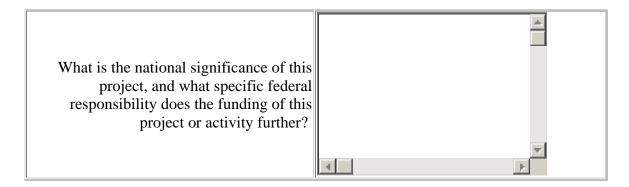
| What is the target date  |                |
|--|----------------|
| for completion of this project,<br>for which you are requesting<br>Federal funds?  | ♦ (MM/DD/YYYY) |
| Number of residents in the 4th U.S. Congressional District that will benefit from this project?  |                |
| How many jobs will be created in the 4th U.S. Congressional District?  |                |
| Priority Ranking: If you are submitting multiple requests, please tell us in what order of priority this project ranks. Number 1 being the most important project: |                |

complete your form, scroll to see that the form has been submitted. You will see a number assigned to this specific project request. If you have letters of support or other items such as a longer description, please email those to Jennifer.Butler-Taylor@mail.house.gov or fax them ATTENTION: JENNIFER at 202 225-5587. In the name of the item, begin with the project number, for example: "FY094913 Smalltown sewer system attachment 1" or "FY094913 Smalltown sewer system letters of support"

Please provide a brief description of the activity or project for which the funding is requested. (Limit the field to 250 characters):

\*Save a copy of this paragraph in your own word processing program.

| Part IV: Additional Committee Questions   |  |     |  |    |
|---|--|-----|--|----|
| The Committee Chairman often will have confollowing questions. Please answer to the ext strongest opportunity for funding.  |  |     |  |    |
| Describe the organization's main activities, and whether it is public, private non-profit or a private for-profit entity:   |  |     |  |    |
| Funds for studies are often in a different category of the related bill. Does your proposal include a study?  |  | Yes |  | No |
| Does this request include a construction request?   |  | Yes |  | No |
| The Committee sometimes does not fund salaries and operating expenses, so we need to know at the time the request is made in order to suggest adjustments as necessary. |  |     |  |    |
| Does this request include funds to cover salaries?  |  | Yes |  | No |
| Does this request include funds to cover ongoing operating expenses?  |  | Yes |  | No |



(End section)

\*

# Complete this section only for HUD earmark requests:

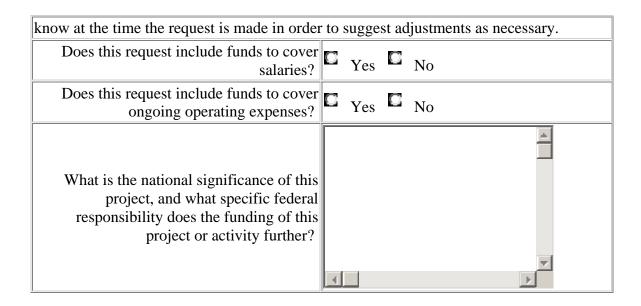
| The Committee requires some additional que agencies: - EPA - HUD - USDA   | stions for projects under the following |
|---|---|
| Please specify the agency for the funding request   | E EPA  HUD  USDA None of the above      |
| Account:  |   |
| This project is largely for economic development:   | 165 110                                 |
| Preliminary planning and engineering design is completed:   | C Yes C No                              |
| Total estimated cost of the project based on facilities plan or preliminary engineering report:  You must enter only numbers, not words | \$                                      |
| The community has a financing plan certified by an authorized local official  | C Yes C No                              |

| demonstrating how it will cover an  |            |  |  |
|---|------------|--|--|
| additional 25% in matching funds:   |            |  |  |
| Previous Funding Info:  |            |  |  |
| Has this project, or any phase it, received a federal EARMARK?  | □ Yes □ No |  |  |
| Has this project, or any phase it, received federal funds that were a grant, as opposed to an earmark?  | Yes No     |  |  |
| Have you received federal funds on a similar project in the last five fiscal years?   | □ Yes □ No |  |  |
| If yes, what is the exact project name as it appeared in a previous bill?   | N/A        |  |  |
| If yes, what was the amount? You <b>must</b> enter only numbers, not words  | \$ 0       |  |  |
| If yes, what was the Agency and Account?  | N/A        |  |  |
| Matching Funds Info:  |            |  |  |
| Some grants require matching funds. Please indicate how much non-Federal funding you are confident of raising and the source. This is important because if a recipient is not able to complete the project, the Federal funds earmarked also cannot be used by other communities which are ready to complete a project: |            |  |  |

| Part III: Additional Information  |              |
|---|--------------|
| What is the target date for completion of this project, for which you are requesting Federal funds? | (MM/DD/YYYY) |
| Number of residents in the 4th U.S. Congressional District that will benefit from this project?     |              |
| How many jobs will be created   |              |

| in the 4th U.S. Congressional District?   |  |  |  |  |
|---|--|--|--|--|
| Priority Ranking:   |  |  |  |  |
| If you are submitting multiple requests,  |  |  |  |  |
| please tell us in what order of priority this   |  |  |  |  |
| project ranks.  |  |  |  |  |
| Number 1 being the most important   |  |  |  |  |
| project:  |  |  |  |  |
|   |  |  |  |  |
| Note: the description box space is limited due  | <u> -</u>  |  |  |  |
| regulations regarding databases which connec  | •  |  |  |  |
| _ <del>-</del> •  | complete your form, scroll to see that the form has been submitted. You will see a |  |  |  |
| number assigned to this specific project reque  | •  |  |  |  |
| items such as a longer description, please em   |  |  |  |  |
| Taylor@mail.house.gov or fax them ATTEN   |  |  |  |  |
| name of the item, begin with the project numsewer system attachment 1" or "FY094913 S |  |  |  |  |
| sewer system attachment 1 or 1 1094913 S  | mantown sewer system letters of support  |  |  |  |
|   | <u> </u>   |  |  |  |
| Please provide a brief description  | _  |  |  |  |
| of the activity or project for which  |  |  |  |  |
| the funding is requested.   |  |  |  |  |
| (Limit the field to 250 characters):  |  |  |  |  |
| *Save a copy of this paragraph in your own  |  |  |  |  |
| word processing program.  | ▼  |  |  |  |
|   | 1  |  |  |  |

| Part IV: Additional Committee Questions  |   |  |  |  |
|--|---|--|--|--|
| The Committee Chairman often will have confollowing questions. Please answer to the extension strongest opportunity for funding. | 1   |  |  |  |
| Describe the organization's main activities, and whether it is public, private non-profit or a private for-profit entity:        |   |  |  |  |
| Funds for studies are often in a different category of the related bill. Does your proposal include a study?                     | Yes No                                      |  |  |  |
| Does this request include a construction request?  | C Yes C No                                  |  |  |  |
| The Committee sometimes does not fund sala   | aries and operating expenses, so we need to |  |  |  |



#### (End section)

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### Complete this section only for USDA earmark requests:

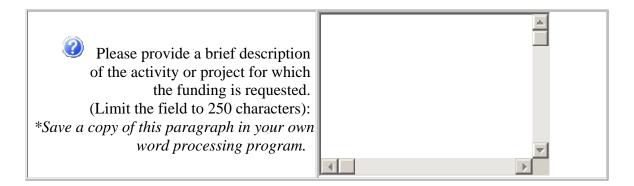
| The Committee requires some additional que                     | estions for projects under the following |  |  |  |  |
|--|--|--|--|--|--|
| agencies:  |  |  |  |  |  |
| - EPA  |  |  |  |  |  |
| - HUD  |  |  |  |  |  |
| - USDA   |  |  |  |  |  |
| Please specify the agency for the funding request              | C <sub>EPA</sub>                         |  |  |  |  |
|  | C <sub>HUD</sub>                         |  |  |  |  |
|  | USDA                                     |  |  |  |  |
|  | None of the above                        |  |  |  |  |
| Previous Funding Info:   |  |  |  |  |  |
| Has this project, or any phase it, received a federal EARMARK? | E Yes E No                               |  |  |  |  |
| Has this project, or any phase it, received                    | C Yes C No                               |  |  |  |  |

| federal f  | federal funds that were a grant, as opposed to an earmark?                                  |                                  |        |         |      |  |
|--|---|----------------------------------|--------|---------|------|--|
| Please provide all available information. If this is a USDA request you <b>MUST</b> provide five (5) years of funding history. |   |                                  |        |         |      |  |
| The project or recipient town or county that was printed in the bill:  |   |                                  |        |         |      |  |
| Func   | ling By Year:   |                                  |        |         |      |  |
| Yea  | Federal<br>Funding<br>r Amount  | Non-Federal<br>Funding<br>Amount | Agency | Account | Page |  |
| 200  | 8 \$  | \$                               |        |         |      |  |
| 200  | 7 \$ 0  | \$ 0                             | N/A    | N/A     | N/A  |  |
| 200  | 6 \$ 0  | \$ 0                             | N/A    | N/A     | N/A  |  |
| 200  | 5 \$ 0  | \$ 0                             | N/A    | N/A     | N/A  |  |
| 200  | 4 \$ 0  | \$ 0                             | N/A    | N/A     | N/A  |  |
| 200  | 3 5 0   | \$ 0                             | N/A    | N/A     | N/A  |  |
|  | Total amount apppropriated for all Fiscal Years: You must enter only numbers, not words     |                                  |        |         |      |  |
| Ha<br>similar p  | Have you received federal funds on a similar project in the last five fiscal years?  Yes No |                                  |        |         |      |  |
| If yes, what is the exact project name as it appeared in a previous bill?  |   |                                  |        |         |      |  |
| 1  | If yes, what was the amount? You <b>must</b> enter only numbers, not words                  |                                  |        |         |      |  |
| If yes, what was the Agency and Account?   |   |                                  |        |         |      |  |
| Matching Funds Info:   |   |                                  |        |         |      |  |

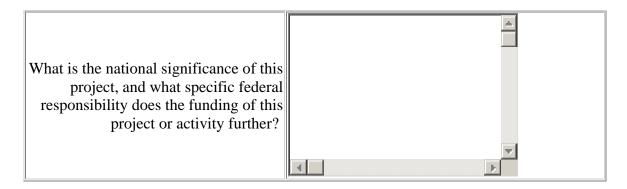
| <u> </u>                                       | <u>A</u> |
|--|----------|
| Some grants require matching funds.            |          |
| Please indicate how much non-Federal           |          |
| funding you are confident of raising and the   |          |
| source. This is important because if a         |          |
| recipient is not able to complete the project, |          |
| the Federal funds earmarked also cannot be     |          |
| used by other communities which are ready      | ▼        |
| to complete a project:                         | 1        |

| Part III: Additional Information   |                       |
|--|-----------------------|
| What is the target date for completion of this project, for which you are requesting Federal funds?  | <b>♦</b> (MM/DD/YYYY) |
| Number of residents in the 4th U.S. Congressional District that will benefit from this project?  |                       |
| How many jobs will be created in the 4th U.S. Congressional District?  |                       |
| Priority Ranking: If you are submitting multiple requests, please tell us in what order of priority this project ranks. Number 1 being the most important project: |                       |

Note: the description box space is limited due to House of Representatives security regulations regarding databases which connect to the House server system. When you complete your form, scroll to see that the form has been submitted. You will see a number assigned to this specific project request. If you have letters of support or other items such as a longer description, please email those to Jennifer.Butler-Taylor@mail.house.gov or fax them ATTENTION: JENNIFER at 202 225-5587. In the name of the item, begin with the project number, for example: "FY094913 Smalltown sewer system attachment 1" or "FY094913 Smalltown sewer system letters of support"



| Part IV: Additional Committee Questions  |  |     |  |    |  |
|--|--|-----|--|----|--|
| The Committee Chairman often will have committee staff require written responses to the following questions. Please answer to the extent possible in order to give your request the strongest opportunity for funding. |  |     |  |    |  |
| Describe the organization's main activities, and whether it is public, private non-profit or a private for-profit entity:  |  |     |  |    |  |
| Funds for studies are often in a different category of the related bill. Does your proposal include a study?   |  | Yes |  | No |  |
| Does this request include a construction request?  |  | Yes |  | No |  |
| The Committee sometimes does not fund salaries and operating expenses, so we need to know at the time the request is made in order to suggest adjustments as necessary.  |  |     |  |    |  |
| Does this request include funds to cover salaries?   |  | Yes |  | No |  |
| Does this request include funds to cover ongoing operating expenses?   |  | Yes |  | No |  |



(End section)

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

## Complete this section only for Program Funding requests:

| Part II: Funding Request Details   |                       |
|--|-----------------------|
| Are you requesting an earmark for a project, or directive language to be included in the Committee Report, or a certain level of funding for a national program? | Farmark for a Project |
| Program name as it appears in the President's budget request:  |                       |
| Agency:  |                       |
| Your requested amount:<br>You <b>must</b> enter only numbers, not words  | \$                    |
| President's budget request for Fiscal Year 2000, if known: You <b>must</b> enter only numbers, not words   |                       |
| Last year's funding amount:<br>You <b>must</b> enter only numbers, not words   | \$                    |

| Part III: Additional Committee Questions  |   |     |  |          |  |
|---|---|-----|--|----------|--|
| The Committee Chairman often will have confollowing questions. Please answer to the extraordest opportunity for funding.  |   |     |  | -        |  |
| Describe the organization's main activities, and whether it is public, private non-profit or a private for-profit entity:   |   |     |  |          |  |
| Funds for studies are often in a different category of the related bill. Does your proposal include a study?  |   | Yes |  | No       |  |
| Does this request include a construction request?   |   | Yes |  | No       |  |
| The Committee sometimes does not fund salaries and operating expenses, so we need to know at the time the request is made in order to suggest adjustments as necessary. |   |     |  |          |  |
| Does this request include funds to cover salaries?  |   | Yes |  | No       |  |
| Does this request include funds to cover ongoing operating expenses?  |   | Yes |  | No       |  |
| What is the national significance of this project, and what specific federal responsibility does the funding of this project or activity further?                       | 4 |     |  | <u> </u> |  |